


MAIL THE COMPLETED FORM TO: The appropriate EPA Regional or State Office.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM - 2007		RECEIVED MAR 03 2008
1. Reason for Submittal (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification of Regulated Waste Activity (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) <input checked="" type="checkbox"/> As a component of Hazardous Waste Report.		
2. Site EPA ID Number (page 10)	EPA ID Number: MOD006284335		
3. SiteName (page 10)	Site Name: North American Galvanizing Company -StL		
4. Site Location Information (page 10)	Street Address: 1461 Kin Ark Ct. City, Town or Village: St. Louis State: MO County Name: ST LOUIS CITY Zip Code: 63132		
5. Site Land Type (page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (page 10)	A. 332812 B. C. D.		
7. Site Mailing Address (page 11)	Street or P.O. Box: 1461 Kin Ark Ct. City, Town or Village: St. Louis State: MO Country: UNITED STATES Zip Code: 63132 <div style="text-align: right;"> 483574  RCRA </div>		
8. Site Contact Person (page 11)	First Name: Chris MI: Last Name: Sumpster Phone Number: 3146168523 Extension: Email Address: csumpter@nagalv.com		
9. Operator and Legal Owner of the Site (pages 11 and 12)	Name of Site's Operator: North American Galvanizing Date Became Operator (mm/dd/yyyy): 11/26/1996 Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other Name of Site's Legal Owner: North American Galvanizing Date Became Owner (mm/dd/yyyy): 11/26/1996 Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

02 APR 2008
 AS QC/QA
 JUN 24 2008
 [Signature]

9. Legal Owner (Continued) Address	Street or P.O. Box: 5314 south yale suite 1000 City, Town or Village: Tulsa State: OK Country: UNITED STATES Zip Code: 74135																	
10. Type of Regulated Waste Activity Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 13 to 16)																		
A. Hazardous Waste Activities Complete all parts for 1 through 6.																		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>Y <input checked="" type="checkbox"/> N <input type="checkbox"/> 1. Generator of Hazardous Waste If "Yes", choose only one of the following - a, b or c.</p> <p><input checked="" type="checkbox"/> a. LQG: Greater than 1000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input type="checkbox"/> b. SQG: 100 to 1000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste</p> <p>In addition, indicate other generator activities.</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> d. United States Importer of Hazardous Waste</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> e. Mixed Waste (hazardous and radioactive) Generator</p> </div> <div style="width: 48%;"> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Transporter of Hazardous Waste</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 3. Treater, Storer or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 4. Recycler of Hazardous Waste (at your site)</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 5. Exempt Boiler and/or Industrial Furnace</p> <p style="margin-left: 20px;"><input type="checkbox"/> a. Small Quantity On-Site Burner Exemption</p> <p style="margin-left: 20px;"><input type="checkbox"/> b. Smelting, Melting, and Refining</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 6. Underground Injection Control</p> </div> </div>																		
<div style="display: flex;"> <div style="width: 50%;"> B. Universal Waste Activities <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. Mark all boxes that apply:</p> <table style="width: 100%; border: none;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Managed</u></th> </tr> </thead> <tbody> <tr><td>a. Batteries</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>b. Pesticides</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>c. Thermostats</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>d. Lamps</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>e. Other (specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>f. Other (specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>g. Other (specify)</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.</p> </div> <div style="width: 50%;"> C. Used Oil Activities Mark all boxes that apply. <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 1. Used Oil Transporter If "Yes", mark each that applies.</p> <p style="margin-left: 20px;"><input type="checkbox"/> a. Transporter</p> <p style="margin-left: 20px;"><input type="checkbox"/> b. Transfer Facility</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 2. Used Oil Processor and/or Re-refiner If "Yes", mark each that applies.</p> <p style="margin-left: 20px;"><input type="checkbox"/> a. Processor</p> <p style="margin-left: 20px;"><input type="checkbox"/> b. Re-refiner</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 3. Off-Specification Used Oil Burner</p> <p>Y <input type="checkbox"/> N <input checked="" type="checkbox"/> 4. Used Oil Fuel Marketer If "Yes", mark each that applies.</p> <p style="margin-left: 20px;"><input type="checkbox"/> a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner</p> <p style="margin-left: 20px;"><input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications</p> </div> </div>				<u>Managed</u>	a. Batteries	<input type="checkbox"/>	b. Pesticides	<input type="checkbox"/>	c. Thermostats	<input type="checkbox"/>	d. Lamps	<input type="checkbox"/>	e. Other (specify)	<input type="checkbox"/>	f. Other (specify)	<input type="checkbox"/>	g. Other (specify)	<input type="checkbox"/>
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f. Other (specify)	<input type="checkbox"/>																	
g. Other (specify)	<input type="checkbox"/>																	

11. Description of Hazardous Wastes (see instructions on page 17)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

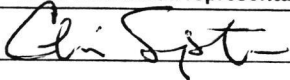
D002	D006	D007	D008			

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if needed for more waste codes.

12. Comments (see instructions on page 17)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(See instructions on page 17)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	Chris Sumpter, Plant Manager	02/18/2008

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: North American Galvanizing

EPA ID NO: MOD006284335

**U.S. ENVIRONMENTAL
PROTECTION AGENCY**

2007 Hazardous Waste Report

**FORM
GM**

**WASTE GENERATION
AND MANAGEMENT**

Instructions: Please see the detailed instructions on pages 18 to 26 of the instructions and forms booklet before completing this form.

Sec. 1	A. Waste Description Spent Hydrochloric acid solution		
B. EPA Hazardous Waste Codes		C. State Hazardous Waste Codes	
D002 D006 D007 D008			
D. Source Code G04 Management Method Code for Source Code G25	E. Form Code W103	F. Quantity Generated in 2007 1,074,620.000000	G. UOM 1 Density <input type="checkbox"/> lbs/gal <input type="checkbox"/> sg

Sec. 2	Was any of this waste managed on-site? (pages 24 and 25) <input type="checkbox"/> Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) <input checked="" type="checkbox"/> No (SKIP TO SEC. 3)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site Management Method Code Quantity treated, disposed or recycled on-site in 2007		On-site Management Method Code Quantity treated, disposed or recycled on-site in 2007	

Sec. 3	A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) <input checked="" type="checkbox"/> Yes (CONTINUE TO BOX B) <input type="checkbox"/> No (FORM IS COMPLETE)		
Site 1	B. EPA ID No. of facility to which waste was shipped OHD020273819	C. Off-site Management Method Code Shipped to H134	D. Total quantity shipped in 2007 1,074,620.000000
Site 2	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2007
Site 3	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method Code Shipped to	D. Total quantity shipped in 2007

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: North American Galvanizing

EPA ID NO: MOD006284335



FORM
OI

U.S. ENVIRONMENTAL
PROTECTION AGENCY

2007 Hazardous Waste Report

OFF-SITE
IDENTIFICATION

Instructions: Please read the detailed instructions on the reverse side before completing this form.

Site 1	A. EPA ID No. of off-site installation or transporter OHD020273819	B. Name of off-site installation or transporter Vickery Environmental
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR facility	D. Address of off-site installation Street 3956 State Route 412 City Vickery Zip 43464 State OH

Site 2	A. EPA ID No. of off-site installation or transporter OHR000103762	B. Name of off-site installation or transporter Vickery Transportation, Inc
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR facility	D. Address of off-site installation Street NA City Zip State

Site 3	A. EPA ID No. of off-site installation or transporter	B. Name of off-site installation or transporter
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR facility	D. Address of off-site installation Street City Zip State

Site 4	A. EPA ID No. of off-site installation or transporter	B. Name of off-site installation or transporter
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR facility	D. Address of off-site installation Street City Zip State

Site 5	A. EPA ID No. of off-site installation or transporter	B. Name of off-site installation or transporter
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR facility	D. Address of off-site installation Street City Zip State

Comments:

SPENT ACID WASTE DISPOSAL TRACKING

PLANTS NAME: St Louis

Stream # _____

First Qtr Total #	345880
Second Qtr Total#	176560
Third Qtr Total #	253580
Fourth Qtr Total #	298600
Total #	1074620

MANIFEST#	AMOUNT IN POUNDS	AMOUNT IN GALLONS	SHIPPING DATE	DATE TDSF MANIFEST RECIEVED	DISPOSAL FACILITY ID	TRANSPORTER ID
5396	43780	4100	01/19/07	01/24/07	STL-01	STL-03
5397	46660	4400	01/19/07	01/24/07	STL-01	STL-03
5398	41860	4000	01/19/07	01/24/07	STL-01	STL-03
5392	43760	3900	03/09/07	03/13/07	STL-01	STL-03
5393	36460	3600	03/09/07	03/13/07	STL-01	STL-03
5395	43400	4000	03/09/07	03/13/07	STL-01	STL-03
1413562	46100	3775	03/09/07	03/14/07	STL-01	STL-03
1413561	43860	4300	03/09/07	03/14/07	STL-01	STL-03
5394	45380	4160	06/06/07	06/15/07	STL-01	STL-03
1413560	46600	4270	06/06/07	06/15/07	STL-01	STL-03
001413558FLE	44680	4100	06/06/07	06/15/07	STL-01	STL-03
001413559FLE	39900	4130	06/06/07	06/15/07	STL-01	STL-03
001413551FLE	45140	4200	08/27/07	09/13/07	STL-01	STL-03
1413553	43280	4200	08/27/07	09/13/07	STL-01	STL-03
1413554FLE	36580	3700	08/27/07	09/13/07	STL-01	STL-03
1413552	42060	4125	08/27/07	09/13/07	STL-01	STL-03
001413556FLE	44420	4700	08/28/07	09/13/07	STL-01	STL-03
001413555FLE	42100	4200	08/28/07	09/13/07	STL-01	STL-03
1413563	40720	4200	12/03/07	12/07/07	STL-01	STL-03
1413550	41500	3800	12/03/07	12/07/07	STL-01	STL-03
5399	40220	3900	12/03/07	12/07/07	STL-01	STL-03
1413544	42320	4000	12/03/07	12/07/07	STL-01	STL-03
1413547	44640	4200	12/03/07	12/07/07	STL-01	STL-03
1413549	44060	4050	12/03/07	12/07/07	STL-01	STL-03
1413548	45140	4250	12/03/07	12/07/07	STL-01	STL-03
TOTALS		28900				

PLANTS NAME: St Louis Note: any waste recorded on this page requires a TCLP metals only and Total Zinc Analysis per generation.
 Numerical Numerical

Note: any waste recorded on this page requires a TCLP metals only and Total Zinc Analysis per generation.

Numerical

[illegible]

DISPOSAL FACILITIES AND TRANSPORTERS

PLANTS NAME: St Louis

NAME & PHONE #	ADDRESS	EPA #	ID
Vickery Enviromental 419-547-4760	3956 State Route 412 Vickery, Ohio 43464	OHD020273819	STL-01
Grammer Industries, Inc		IN0000917880	STL-02
Vickery Transportation, Inc. (formally Grammer Industries) 419-547-4760	3956 State Route 412 Vickery, Ohio 43464	OHR000103762	STL-03
Waste Management Milam RDF 618-271-6788	601 Madison Ave. East St. Louis, MO 62201		STL-04
Waste Management 800-989-2783	7320 Hall Street St. Louis, MO 63147		STL-05
Robbie D. Wood, Inc. 205-744-8440	PO Box 10992 Birmingham, AL 35202		STL-06
Perma Fix Treatment Services 918-582-9595	2700 South 25th West Ave. Tulsa, OK 74107	OKD000402396	STL-07
Perma Fix Treatment Services 918-582-9595	2700 South 25th West Ave. Tulsa, OK 74107	OKD000402396	STL-08
Envirite of Illinois, Inc 1-800-335-4783	16435 Center Avenue Harvey, IL 60426	ILD000666206	STL-09
Envirite of Illinois, Inc 1-800-335-4783	16435 Center Avenue Harvey, IL 60426	ILD000666206	STL-10
Pollution Control Industries 219-397-3951	4343 Kennedy Ave East Chicago, In 46312	IND000646943	STL-11
Univar USA Inc 314-522-6400		MOD084396985	STL-12
Schiber Trucking		ILD006493191	STL-13
Pettit Environmental, Inc. 502-637-5100	340 Byrne Avenue Louisville, KY 40209	DOT Hazmat # 060805 550 082NO	STL-14
Veolia Enviro 618-931-0010	121 E Chain of Rocks Rd Mitchell IL 62040	ILD053980272	STL-15

PAGE 1

Notes:

ID = Texas facilities use their Texas ID number

Other facilities can use to specify facilites with a three sequential digits (001, 002, 003, etc) for reference on othe